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File Number:	
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92-23TT	
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For the reporting period ended	
December 31, 2002	
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ATTENTION:



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB API	PROVAL
OMB Number:	3235-0337
Expires:	July 31, 2003
Estimated average	ge burden
hours per full res	ponse 6.00
Estimated average	ge burden
hours per interm	ediate
response	1.50
Estimated averag	
hours per minimi	um
response	

FORM TA-2

FORM FOR REPORTING ACTIVITIES OF TRANSFER AGENTS REGISTERED PURSUANT TO SECTION 17A OF THE SECURITIES EXCHANGE ACT OF 1934

INTENTIONAL MISSTATEMENTS OR OMISSIONS OF FACT

CONSTITUTE FEDERAL CRIMINAL VIOLATIONS!\"

See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a) 1. Full name of Registrant as stated in Question 3 of Form TA-1: (Do not use Form TA-2 to change name or address.) BANK OF CLARKE COUNTY a. During the reporting period, has the Registrant engaged a service company to perform any of its transfer agent functions? (Check appropriate box.) XX None ☐ VII Some b. If the answer to subsection (a) is all or some, provide the name(s) and transfer agent file number(s) of all service company(ies) engaged: Name of Transfer Agent(s): File No. (beginning with 81- or 85-): e. During the reporting period, has the Registrant been engaged as a service company by a named transfer agent to perform transfer agent functions? ☐ Yes X No d. If the answer to subsection (c) is yes, provide the name(s) and file number(s) of the named transfer agent(s) for which the Registrant has been engaged as a service company to perform transfer agent functions: (If more room is required, please complete and attach the Supplement to Form TA-2.) Name of Transfer Agent(s): File No. (beginning with 84- or 85-):

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3,	a.	Comptrolle Federal De Board of	propriate reguler of the Current posit Insurance dovernors of the and Exchange (icy : Corporatio : Federal R	on eserve Syste	•	only.)			
	b.	During the reporting period, has the Registrant amended Form TA-1 within 60 calendar days following the date on which information reported therein became inaccurate, incomplete, or misleading? (Check appropriate box.)									
			amendment(s) to file amendmable	ent(s)							
	c.	If the answer t	o subsection (b) is no, pro	vide an expl	anation:					
		If	the response	to any of	questions	4-11 below i	is no	se or zero	o, enter "(0."	
4.	Nu	mber of items re	eceived for tran	isfer during	the reportir	ng period:		***************************************			0
5.	a.	Total number (System (DRS)	of individual se , dividend reins								1,295
	b.	Number of ind as of December	lividual security or 31:			· ·		•	•	coun	ts 774
	c.										0
	d.	Approximate December 31:	percentage of i	ndividual s	ecurityholde	er accounts from	m sub	section (a)	in the foll	owin	ig categories as of
		Corporate Equity Securities	Corporate Debt Securities	I:	Open-End nvestment Company Securities	Limited Partnersh Securitie	ip	Municip Secur	1		Other Securities
		100									
6.	Nu	mber of securiti	ies issues for w	hich Regist	rant acted in	the following	capac	ities, as of	December :	31:	
	,		Corporate Securities		Open-End Investment Company	Limited Partnership Securities		Municipal Debt Securities		Other Securities	
	Receives items for transfer and maintains the master			Equity 1	Debt	Securities					
	securityholder files: b. Receives items for transfer but does not maintain the master securityholder files: c. Does not receive items for transfer but maintains the master securityholder files:		0								
			0								

7.*		ope of certain additional types of activities performed: Number of issues for which dividend reinvestment plan and/or direct purchase plan						
		services were provided, as of December 31:						
	b.	Number of issues for which DRS services were provided, as of December 31:	0					
	c.	Dividend disbursement and interest paying agent activities conducted during the reporting period: i. number of issues	1					
		ii. amount (in dollars)	0					
8. a.		. Number and aggregate market value of securities aged record differences, existing for more than 30 days, a December 31:						
		Prior Curren Transfer Agent(s) Transfer (If applicable)						
		i. Number of issues 0						
		ii. Market value (in dollars) 0 0						
	b.	Number of quarterly reports regarding buy-ins filed by the Registrant with its ARA (including the SEC) during the reporting period pursuant to Rule 17Ad-11(c)(2):	0					
	C.	During the reporting period, did the Registrant file all quarterly reports regarding buy-ins with its ARA (including the SEC) required by Rule 17Ad-11(c)(2)?						
		☐ Yes ☐ No						
	đ.	If the answers to subsection (c) is no, provide an explanation for each failure to file:						
			· · · · · · · · · · · · · · · · · · ·					
9.	a.	During the reporting period, has the Registrant always been in compliance with the turnaround time for as set forth in Rule +7Ad-2?	routine items					
		∑ Yes □ No						
		If the answer to subsection (a) is no, complete subsections (i) through (ii).						
		i. Provide the number of months during the reporting period in which the Registrant was not in compliance with the turnaround time for routine items according to Rule 17Ad-2	0					
		ii. Provide the number of written notices Registrant filed during the reporting period with the SEC and with its ARA that reported its noncompliance with turnaround time for routine items according to Rule 17Ad-2.	0					
10.		umber of open-end investment company securities purchases and redemptions (transactions) excluding di	vidend, interes					
	anc a.	d distribution postings, and address changes processed during the reporting period: Total number of transactions processed:	0					
	а. b.	Number of transactions processed. Number of transactions processed on a date other than date of receipt of order (as ofs):	0					

11. a. During the reporting period, provide the date of all database searches conducted for lost securityholder accounts listed on the transfer agent's master securityholder files, the number of lost securityholder accounts for which a database search has been conducted, and the number of lost securityholder accounts for which a different address has been obtained as a result of a database search:

Date of Database Search	Number of Lost Securityholder Accounts Submitted for Database Search	Number of Different Addresses Obtained from Database Search
02/15/02	4	0
05/15/02	4	0
08/15/02	4	0
11/15/02	4	0

•	Number of lost securityholder accounts that have been remitted to states during the reporting period: O							
SIGNATURE: The Registrant submitting this Form, an information contained in the Form is tru	nd the person signing the Form, hereby represent that all the ic, correct, and complete.							
Manual signature of Official responsible for Form:	Title: SENIOR VICE PRESIDENT & CHIEF FINANCIAL OFFICER Telephone number: (540) 955-2510							
Name of Official responsible for Form:	Date signed							
(First name, Middle name, Last name)	(Month/Day/Year):							
JAMES W. MCCARTY, JR.	02/28/03							

JAMES W. MCCARTY, JR.